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## POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND

CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/047,660			
Filing Date	01/15/02	***************************************		
First Named Inventor	Louisa Shaefer			
Title	Night Light	***************************************		
Art Unit	2875			
Examiner Name	Truong, Bao Q.			
Attorney Docket Number				

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
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I am the:  Applicant/Inventor.  OR  Assignee of record of the entire interest. See 37 CFR 3.71.								
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on								
SIGNATURE of Applicant or Assignee of Record								
Signatu Name Title an	d Company	Lours Cautt	Sharfa Sharfa		Date Telephone	7/15/18 2/6-545-477/		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of forms are submitted.								

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